



Domestic Student Health Plan

When making a pay direct drug/dental claim, the pharmacy/dentist will need to know the following:



Group Number: 514560

Provider: ClaimSecure

Certificate Number: R 0 0 _ _ _ _ _

(Add your 7-digit student number)

*If mailing your claim please
mail your prescription drug
or dental claim directly to:

ClaimSecure Inc.

P.O. Box 6500 STN A
Sudbury, ON P3A 5N5

All drug, extended health care & accident inquiries
call Alumo **519-913-3701**.

All dental inquiries call ClaimSecure **1-888-513-4464**.

FOR QUESTIONS AND INQUIRIES GO TO THE FSU OFFICE - SC1000



www.fsu.ca/health